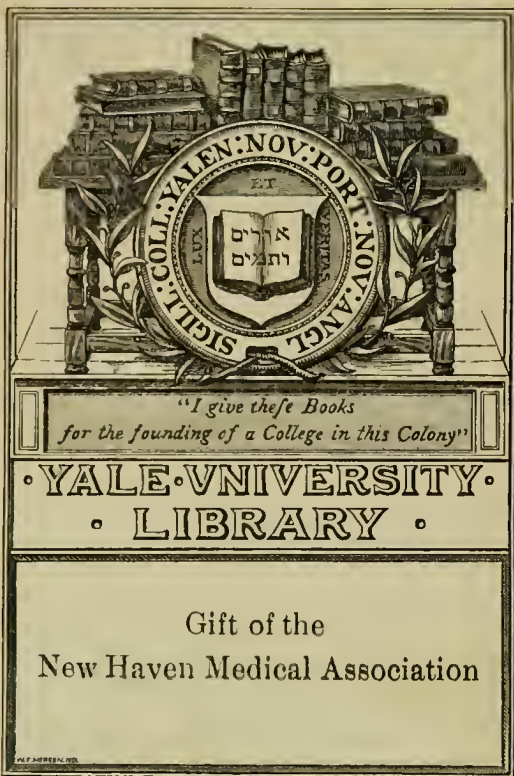


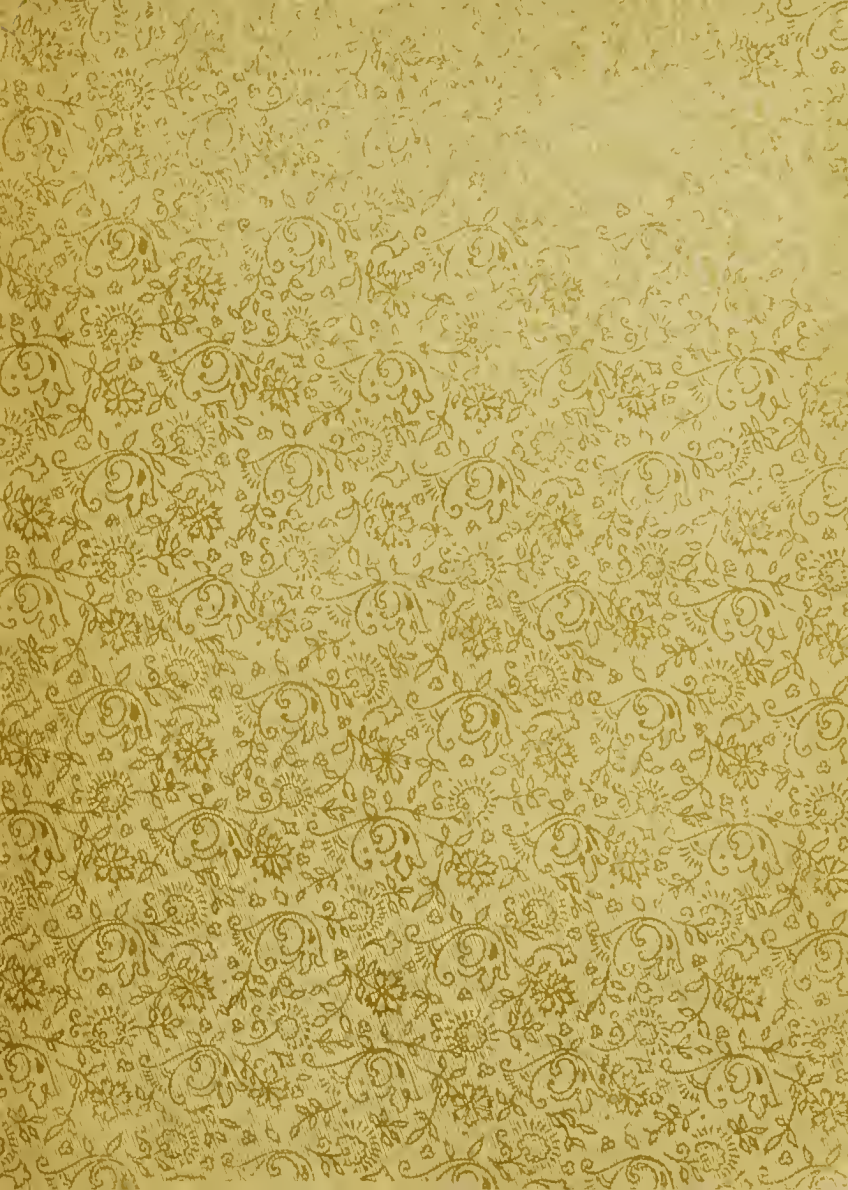
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== Care of ==
The Expectant Mother

• HOWE •



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CARE OF THE EXPECTANT MOTHER
—
HOWE

A TREATISE
ON THE
CARE OF THE EXPECTANT MOTHER
DURING
PREGNANCY AND CHILDBIRTH
AND
Care of the Child from Birth Until Puberty

BY
W. LEWIS HOWE, M.D.



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PREFACE.

THE writer of this treatise lays no claim to originality, his object in preparing this little book being mainly to place the expectant mother on a common-sense footing as to her condition, the care of herself during the period of pregnancy, care of herself and child after birth, and care of child until puberty.

An effort is made to state the normal conditions, also slight illnesses which may arise during this period, and how to avoid same, and when one should consult a physician.

The author acknowledges his indebtedness to the standard manuals and text-books of "Obstetrics and Pediatrics," and to the writings found in the current medical literature by various authors, for the aid afforded in the preparation of this little volume.

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CHAPTER I.

SIGNS AND SYMPTOMS OF PREGNANCY.

ABSENCE OF MENSTRUATION.

THE first sign to excite suspicion of existing pregnancy is the cessation of menstruation, and it is of great importance as forming the only reliable guide for calculating the probable period of delivery.

This cessation, though, does not always indicate pregnancy, as in newly-married women it is not uncommon for menstruation to cease for one or two periods. Also exposure to cold and general debility are frequent causes.

NAUSEA AND VOMITING, OR "MORNING SICKNESS."

This is considered conclusive evidence of pregnancy by most mothers. It generally commences about the second month, and stops

about the fourth month. Generally there is nausea rather than actual vomiting.

CHANGES IN THE BREASTS.

This is of early occurrence, and consists of enlargement, tingling sensation, and change in color of the nipple. When these signs are well marked they are usually conclusive.

ENLARGEMENT OF THE ABDOMEN AND "QUICKENING."

With the progressive enlargement of the abdomen and the quickening at about the fourth month, one can rest assured of being in a pregnant condition.

The above symptoms are the most dependable, but there are numerous minor signs which occur in some women while not in others, such as sleeplessness, diarrhœa, constipation, depraved appetite, change in disposition, toothache, heartburn, etc.

Absolute dependence cannot be placed on any one of the above symptoms, but where two or more occur in conjunction one can be reasonably safe in considering herself pregnant.

As soon as a woman suspects that she is pregnant, she should place herself under the care of her physician.

CHAPTER II.

HOW TO CALCULATE THE TIME OF PROBABLE DELIVERY.

THERE are many rules for reckoning on this event, but the surest is as follows:—

Take the day of the disappearance of the last monthly sickness, subtract three months from that date, and add seven days. The result corresponds with the day on which labor should commence, and will be found to be 280 days.

Example:—

Last day of monthly sickness, January 2d.

Less 3 months = October 2

Add 7 days, 7

October 9th = date

on which labor should commence. It may also be reckoned by adding 280 days to the date on which the last menstruation *commenced*.

The above rules are not absolutely sure, but are as reliable as any. However, childbirth may occur either a few days before or a few days after the reckoned date, and yet be considered normal.

CHAPTER III.

DIET FOR PREGNANT WOMEN.

THIS depends entirely upon the woman's habits and tastes, as what agrees with one will not agree with another. The diet should be light and nutritious, and varied from day to day that it may not become monotonous.

An excess in eating or drinking is the cause of many grievous complaints. Do not at this time eat food which is distasteful or has a tendency to derange the bowels. Highly seasoned or very rich food should be used in moderation, and fatty foods or coarse vegetables should be partaken of sparingly.

FOOD FROM WHICH A DIET MAY BE CHOSEN.

Soups, meat-juices, flesh of young animals (such as veal, lamb, and chicken), fresh fish, milk, entire-wheat bread, tonics and light wines

(if wine is used, it should be drunk at supper), fruits in their season.

Meat, as a rule, should only be eaten once a day, and this at noon.

The cravings for food which some women have during the night or early morning may be relieved by a little milk, cup of coffee, or crackers. Malted-milk tablets are very useful at this stage. Plenty of fresh water should be taken between meals.

CHAPTER IV.

CLOTHING FOR THE PREGNANT WOMAN.

THE manner of dressing during this period is of the gravest importance. If proper attention is paid to this during pregnancy a woman will find childbirth to be freer from danger and convalescence more rapid. All tightly-fitting garments should be laid aside, and loose ones adopted. The more freedom of motion that one can obtain for the chest and abdomen, the better. Corsets should be absolutely forbidden. A light-weight abdominal support which adapts itself to the shape of the abdomen is advisable. The clothes should be supported from the shoulders, and not from the waist or hips.

As pregnant women are more susceptible to changes in temperature, they should be supplied with garments to meet all changes in climate.

The garters worn should be those that are
(8)

commonly known as side-garters, not the circular elastic worn around the leg.

It is advisable to wear flannel drawers during the last four months of pregnancy, even if this occurs during warm weather, and at all times closed drawers should be worn.

High-heeled shoes are not conducive to the well-being of either mother or child.

CHAPTER V.

EXERCISE FOR PREGNANT WOMEN.

NO PARTICULAR change should be made from the ordinary manner of living, in diet, or exercise, excepting that the woman should be especially quiet during the week corresponding to the usual time for menstruation. Unnecessary precaution at other times, such as lounging around all day, is equally as injurious as overexercise would be, but moderate exercise should be had daily. Household duties are healthful and good exercise for mind and body. A gently active life is advisable for the health of the mother and unborn child.

A woman should go out-of-doors daily, either to walk or drive, whichever she prefers. If driving is preferred, smooth streets should be chosen for the route, and all rough places in the road avoided. Do not continue the driving or walking until fatigued.

Long journeys should not be undertaken,

but, if unavoidable, they should be planned to take place between the times when the monthly flow would ordinarily have occurred, and, if possible, should be deferred until between the fifth and seventh month. The drives or walks should be short and frequent, rather than long and few.

Theaters, concerts, and dinners may be attended in moderation, although during the last two months they should be discontinued. A woman should also avoid climbing long flights of stairs, and also avoid the presence of disagreeable and unsightly objects. Undue mental excitement is injurious.

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CHAPTER VI.

SLEEP DURING PREGNANCY.

DURING this time a larger amount of sleep is required than ordinarily, and at least eight hours out of every twenty-four should be spent in bed.

An occasional nap during the day is advisable, and a nap of an hour or so on the couch will be found very refreshing.

The bed should be of iron and the mattress of hair or sponge. One should not sleep on a feather bed if possible to avoid it. The bed-covering should be light and warm, and woolen blankets are preferable to coverlets. The bed should be thoroughly aired each day, and the atmosphere in both bed-room and living-rooms be kept fresh.

The doors and windows of every room unoccupied should be kept open during the summer and sufficiently often in winter to keep them well aired.

CHAPTER VII.

BATHING FOR PREGNANT WOMEN.

BATHS are recommended from the very beginning and all during this period, and should only be withheld from women who abort. It is advisable to make the bath as short as possible, having the water at about 90° to 95° F. Then either lie in a bed or on a couch well covered up for an hour afterward.

Sea-baths, cold baths, and douches are permitted, under certain conditions. The sea-bath should only be taken when the water is warm, and should only last for about five minutes. No swimming should be undertaken.

Douches are only permitted for women who have been in the habit of using them previously, and should never be attempted by the woman herself, but be given by the physician or an experienced nurse. The toilet should be made with lukewarm water.

CHAPTER VIII.

CARE OF NIPPLES BEFORE AND AFTER BIRTH.

THE nipples should receive attention after the fifth month, to provide, if possible, against soreness while nursing.

Alcohol and water, equal parts, should be applied twice daily, and moderate friction, first with the fingers, and later with a bit of rough cloth, will aid in hardening them. If, however, as sometimes occurs, the slightest discomfort in the abdomen is produced by friction on the nipples, it should at once be discontinued, depending upon the bath alone.

If the nipples are flat and apparently too small for serving their purpose, the physician's attention should be directed toward them.

CHAPTER IX.

RULES FOR THE PREGNANT WOMAN TO FOLLOW.

ANY discharge of blood, no matter how slight, or the occurrence of bearing-down sensation, or unwell pains at any time during pregnancy, is a signal for going directly to bed and remaining perfectly quiet until all symptoms disappear. Call the physician at once should the flow of blood be anything more than a mere stain, or if the pain continues more than an hour or two. It is very important that the above symptoms are not neglected, as they point toward miscarriage.

Avoid coming in contact with contagious diseases, eruptive fevers, typhoid fever, sore throat, unsightly objects, excitement, fright, worry, climbing long flights of stairs, lifting, washing clothes, exposure to draughts, long journeys, exercise during period of regular sick-

nesses, eating food which disagrees with stomach, and unpleasant thoughts. Endeavor to always keep one's self good natured and in a pleasant frame of mind. A sample of the urine should be sent to the physician for examination each month after the fifth.

CHAPTER X.

WHEN TO CONSULT DOCTOR FOR PREGNANT WOMEN.

ANY discharge of blood from the vagina.

Swelling of the legs.

Varicose veins.

Piles.

Indigestion.

Constant vomiting.

Constipation or diarrhoea.

Bearing-down sensations.

Headache, especially when associated with
dimness of sight.

Ulcerated or cracked nipples.

Sunken nipples.

CHAPTER XI.

PREPARATIONS FOR CONFINEMENT.

ARRANGEMENT OF ROOM.

THIS room should be up one flight if possible and have a southern exposure. A hard-wood floor is best, and do not have a carpet or any draperies, and the room must be absolutely clean. If the room is carpeted, preparations should be made so that at childbirth the carpet can be protected by an old rug, sheets of wrapping paper, or sheets pinned securely to the floor and sprinkled with 1-per-cent. carbolic solution.

The bed should be of iron with a hair mattress, and should not be over what is commonly known as a two-thirds bed, and placed in such a position that the doctor can get at either side.

If it is possible to provide a couch it is much better, and should be raised to the height of an ordinary bed. The bed must be kept warm by

means of hot-water bottles so that the mother can be removed from the couch to the bed immediately after giving birth.

ARTICLES NECESSARY FOR CHILDBIRTH.

1. Make from thin cheese-cloth and absorbent-cotton waste two bed-protectors, each 1 yard square, heavy paper on one side, covered with cheese-cloth, and filled to the thickness of 2 inches with the waste, and tack firmly around the edges.

2. Four pads to be worn during the first two days, each of cheese-cloth, cut 27 x 18 inches, folded, and filled to the thickness of 3 inches.

3. Twenty-four pads, each of cheese-cloth, cut 21 x 18 inches, folded, and filled in the same way.

Baste these pads all through the center.

4. Four dozen pieces of cheese-cloth about 6 inches square, to be used instead of sponges.

All the above must be pinned tightly in bags of cotton cloth and baked in the oven half an

hour each day for three days, no matter if slightly browned by the heat.

Do not open until ready to be used.

5. A rubber sheet, 1 x 2 yards.

6. Six or eight large sheets of heavy brown wrapping paper.

7. Bed-pan.

8. Four-quart fountain-syringe.

9. Bottle of colored corrosive-sublimate tablets.

10. Half-pound of Squibb's ether.

11. Safety-pins, large and small.

12. Eight ounces of pure olive-oil.

13. Eight-ounce package of absorbent cotton.

14. Two yards of unbleached cotton cloth, for binder.

15. Four ounces of 3-per-cent. solution of boric acid.

At time of confinement at least 2 gallons of water, which has just been boiled for at least half an hour and then cooled; also plenty of boiling water; towels, white Castile soap, 2 agate or porcelain basins, and 2 pitchers. Two

or three ounces of strained vinegar may be needed, also ice.

A flannel binder, 5 x 18 inches, a woolen shirt, petticoat, frock, small shawl, and pieces of old muslin for napkins, for the baby.

Soft cloth for baby's eyes and mouth kept in a glass of warm water.

A teaspoon, a medicine glass, and either talcum powder or powdered starch should be on hand.

PREPARATION OF THE BED.

The preparation of the bed is not to be slighted, and the following is a good method:—

Place the rubber sheet next the mattress (or, if you have no rubber, three thicknesses of wrapping paper will answer) and over this the regular under sheet. Next place three thicknesses of wrapping paper across the middle of the right side of the bed, allowing them to cover well the edge of the mattress; over them lay a folded comforter, blanket, or sheet,—the thicker, the better,—and over all a clean sheet

folded once, extending across the bed and secured smoothly by safety-pins. The carpet should also be protected by an old rug, or quite as well by sheets of wrapping paper.

CHAPTER XII.

SIGNS OF LABOR.

THE usual signs of labor are "pains" of an intermittent, bearing-down character, at first, perhaps, in the lower part of the abdomen, but gradually involving the back, increasing in severity, regularity, and frequency. The first symptom may be a continuous flow or sudden gush of water, and it is well to notify the physician of this occurrence. Most physicians prefer to be called early rather than late. As soon as labor-pains commence the patient should take an injection of at least a pint of warm soap and water, retaining it as long as possible, to move the bowels, even if they have recently operated, as by attention to this some trouble later on may be saved. The hips and genitals should be thoroughly bathed with Castile soap and water. No douche is needed unless directed.

CHAPTER XIII.

DRESS DURING LABOR.

WHEN labor commences only one loose garment is necessary, that is, a loose wrapper or night-dress, but during cool weather a gauze undershirt should also be worn. When put to bed though, only a chemise is to be worn.

CHAPTER XIV.

CARE OF WOMAN AT CONFINEMENT.

UNDOUBTEDLY the one factor which contributes most to the safety of mother and child during and especially after delivery is cleanliness, and here we are not satisfied with cleanliness which belongs to even the most careful housekeeping and toilet, but must insist upon everything which comes in contact with the patient—such as hands, instruments, utensils, or dressings—being made surgically clean by boiling or baking when possible. By baking in case of dressings, or by scrubbing and use of disinfectant solutions in case of hands or utensils. Frequently bathe the external genitals with boiled water, using sterilized cotton or gauze for drying. Watch the discharges carefully for unnatural odor, and save a pad each day for the doctor's inspection.

Keep patient quiet and avoid all excitement, allowing no visitors for the first week or ten days excepting the immediate family.

Do not be afraid of fresh air, but avoid draughts. Cleanse the nipples before and after each nursing with boiled water, drying carefully afterward, reporting the first sign of soreness.

Do not use breast-pump without orders.

Water may be given freely to drink.

The diet should be liquid for the first two or three days.

The linen should be changed as often as soiled.

The urine should be voided about five hours after delivery.

The secretion of milk usually comes in about 48 hours.

There is generally a discharge of bloody color for a week or two after confinement, and may be much or little in amount.

The after-pains need not cause any anxiety, as they are due to contraction. These pains begin a few hours after delivery and continue

for a variable length of time: twelve hours to three days.

The mother should not be allowed to lift the infant during the first ten days.

The bowels should be moved the second or third day surely.

If there is any hæmorrhage from the vagina, the doctor should be notified at once. While waiting for the doctor in this case, elevate the foot of the bed and keep patient absolutely quiet.

CHAPTER XV.

FIRST BATH FOR THE BABY AND SUBSEQUENT BATHING.

AFTER the cord has been carefully cared for by the doctor, the eyes, nose, and mouth should be immediately cleansed with a solution of boric acid. Then the child should be smeared all over with warm olive-oil, rubbed in gently by the hand, then placed in a warm bath at about 95° F. Carefully wash with Castile soap and dry with a soft, warm cloth. The body may now be dusted with talcum powder or starch, and then given to the physician for dressing of the cord, after which put on the abdominal band and dress the infant.

Wrap now in a blanket and place in its crib, and keep warm by hot-water bottles and allow to go to sleep. It should not be rocked, as this is not only useless, but may provoke vomiting.

The child should be bathed every day for about five minutes, and the temperature of the

water about 90° to 95° F., until the child is two months old. Gradually reduce the temperature of the bath as the child grows older, and at the age of eight to twelve months the temperature should be about 85° F. After bathing gently rub with a soft towel.

CHAPTER XVI.

FEEDING OF INFANTS AND CHILDREN.

THE proper, and, of course, the best, method of feeding an infant is from the mother's breast, unless there are physical reasons why this should not be done. Every healthy mother should consider it her duty to nurse her child, as breast-milk is the best, and also the mother's health is better if she can nurse her child.

Feed the infant nothing but warm water until directed by the doctor, but put to breast within six hours after birth, and repeat this three or four times during the first forty-eight hours. It is impossible to make one rule for feeding which can be applied to every case, as no two children are alike in their powers of digestion.

A mother must study her child so that she can know herself when the baby has nursed sufficiently. When a child shows indifference to

nursing it is usually a sign that it has been satisfied. Some children like to nurse slowly, stopping occasionally to rest, and then nursing a little more. Others prefer to take it all at once. Don't allow a child to get into the habit of prolonging its nursing unnecessarily.

Doctors differ as to the correct time when a child should be first given the breast, but a safe rule is between 6 and 18 hours from birth, and it should then be allowed to nurse every two or three hours during the day, and not over twice at night.

The first day the child should be put to breast about once in every five hours. If the child cries much the first day, a teaspoonful of warm water and milk-sugar can be given. The second day once in four hours. After the third day from eight to ten nursings in every twenty-four hours. From the first to fourth month there should be eight nursings in every twenty-four hours. From fourth to sixth month seven nursings at intervals of about three hours; and six to twelve months, five or six in twenty-four hours.

The nursings should be from five to eight minutes long. When nursing the child in bed the mother should be in a recumbent position, holding the child on the arm of the side on which she is lying, and when out of bed should sit upright when nursing. The child should be awakened at 9.30 to 10 P.M. and allowed to nurse; then once again during the night should be enough.

During the second year a child should be fed about five times a day, the larger meal being at midday, and no feedings during the night. After the child is one and one-half years old small pieces of meat may be given. The bulk of the diet the second year should be milk, some cereals, meat-broths, eggs, and fruit. The cereals should be made thin, about the consistency of gruel, and well cooked. Don't be in too much of a hurry to give a child solid food. All bread given the child should be stale, and it is better if toasted. Cane-sugar should not be given. Fruits should not be omitted after the child is one and one-half years old, such as orange-juice, stewed prunes, and baked apples.

Sugar should not be used in these. The proper time to give fruit is about one-half hour before second meal.

The first, second, fourth, and fifth meals should consist of 9 to 11 ounces of milk prepared with gruel. Do not allow a child to eat between meals, only water being given.

FEEDING FROM THIRD TO SIXTH YEAR,
INCLUSIVE.

Again, it will be impossible to lay down any hard-and-fast rules as to the diet during this age, but a list of articles is given which are allowable, and a list of forbidden foods.

ARTICLES ALLOWED.—*Soups and broths* (all kinds of meat-broths are preferable, and cream and milk may be added to increase the nutritive qualities and palatableness).

Cereals.—These should be thoroughly cooked and well salted, and served with cream or milk and very little sugar, and consist of arrowroot, wheat, rice, hominy, oatmeal,

etc. There are endless varieties of cereals now on the market, all of which are more or less nutritious.

Milk. — This should be the basis of the child's diet, and that obtained from a large dairy is better than milk from one cow. A list of the various ways in which to serve milk will be found on page 62.

Cream. — Besides the nutritive qualities, cream also possesses medicinal properties, as it acts as a good laxative. It may be used on cereals, potatoes, etc.

Eggs. — These should not be given oftener than every second or third day, and should be absolutely fresh and served either soft boiled, poached, or beaten up with milk.

Vegetables. — Baked potatoes may be given once a day, with beef-juice or cream. String beans, spinach, asparagus tops, and fresh pease may all be given, but well cooked.

Bread. — Stale bread is preferable. Biscuits may be given made from Graham, gluten, etc. Water-crackers are also allowable.

Fruit.—This is allowed every day, but care should be exercised about this in the summer-time.

Desserts.—Plain custards, ice-cream, junket, and gelatin.

ARTICLES FORBIDDEN. — The articles now named should not be given before six years of age, except on rare occasions.

All hot breads, sweet cakes, griddle-cakes, frosted cakes, and fruit cakes.

Meats.—Pork, corned beef, game, duck, geese, salt fish, sausages, and ham.

Vegetables.—Fried onions, celery, tomatoes, cucumbers, lettuce, beets, green corn, cabbage, and carrots.

Berries must not be given.

Desserts.—Pies, candies, syrups, preserves, salads, nuts, and pastry of any description.

Drinks.—Beer, wine, cider, coffee, tea, cocoa, etc.

Fruits.—All fruits out of season and dried, canned, or preserved fruits.

CHAPTER XVII.

CLOTHING FOR CHILDREN.

It should be understood that a child is more sensitive to a change in temperature than an adult, and it is therefore imperative that they should be dressed in accordance.

The diaper should be of stockinet or Canton flannel. An abdominal band should be worn for the first few weeks, made of plain flannel.

Young children should never have dresses cut low in the neck or with short sleeves. The clothing should be light, warm, non-irritating, and loose enough to allow free movements of the limbs. The shirt must always be woolen, light weight in summer and heavier in winter, and cut high in the neck and with long sleeves. The stockings to be either of cotton or wool, and to come above the knees. The skirts should be supported from the shoulders. The night-dress should be made in the form of pants, and

no clothing that is worn during the day ought to be worn at night. During the summer the clothing should be light. All the fastenings for the clothing ought to be tapes, not pins. The shoes must be loose, as tightly-fitting shoes will cause deformity.

CHAPTER XVIII.

SLEEP.

FROM birth the infant should be trained to sleep, and at regular intervals it should be put into its crib and taught to go to sleep of its own accord, without any nursing or rocking. If a child has been fed, and has a warm comfortable bed, dry napkins, and in a darkened room, it will sleep under these conditions.

For the first two or three days the child should sleep most of the time. Afterward, for the first six months, a child should sleep sixteen to eighteen hours out of every twenty-four.

During the day the naps should be two or three hours long, and at night five or six hours.

Feed the child regularly, every two or three hours during the day, waking it if necessary for this; but at night allow it to sleep uninterruptedly. Regularity in feeding and sleeping makes the care of the infant much easier and keeps it healthy.

A child should have daily naps until four years of age. When one year old it should sleep fourteen to sixteen hours out of the twenty-four; two years old, thirteen to fourteen hours; four years old, eleven to twelve hours; six to ten years, ten to twelve hours; nine to sixteen years, nine to eleven hours.

On waking a child should be taken up immediately, and washed and dressed, and not allowed to remain in cradle and fuss. Also should be allowed to wake in the morning of its own accord.

When necessary to wake a child be sure to do so gently.

Talking or light should never be allowed in a room after a child has settled to rest.

Teach a child to sleep on its side, and, after sleeping for a time on one side, it is resting to the child to turn it on to the other side.

Never allow a child to sleep on wet or soiled sheets.

Never give medicine to a child to induce sleep. The two main causes of disturbed sleep are hunger and indigestion.

CHAPTER XIX.

CARE OF THE TEETH.

DURING dentition the child generally has more or less slight ailments, or it may be fortunate enough to escape with none. It may suffer from sore mouth, indigestion, fever, diarrhœa, or convulsions. A diarrhœa is generally natural at this time, but, if it is offensive, the child should receive a thorough cleaning out with castor-oil or some simple cathartic, but a carefully regulated diet is generally all that is necessary.

Very often a child's irritability is due to an inflamed condition of the mouth. Generally there is too little attention paid to the care of the mouth and teeth. Early care will save the child considerable suffering, and be the foundation for good teeth in later life. After each feeding the child's mouth should be carefully washed out in the following manner: A little

absorbent cotton should be wrapped tightly around the end of a small, smooth stick; dip this in boiled, lukewarm water, and then carefully swab out the mouth.

The first teeth are twenty in number, and generally appear between the sixth and ninth month; but this time is subject to considerable variation. From the time that these teeth first make their appearance they should receive daily attention, by rinsing with warm water and a small, soft camel's-hair tooth-brush after each meal, and, as soon as a child is able to attend to this itself, he should be taught to cleanse the teeth after every meal.

All carious teeth should be filled or removed at once. The permanent teeth make their appearance at about the sixth year of age, and are thirty-two in number. A dentist should be consulted very soon after these permanent teeth present themselves, in order that he may correct all anomalies. These teeth also should receive daily attention, being cleansed after every meal. At this age the child should be able to attend to this itself, and at least three times a

week should cleanse thoroughly with some good non-irritating tooth-wash or tooth-powder; but at other times clear warm water is sufficient to use. Chalk and orris-root is a good preparation, in the proportions of 1 part of powdered orris-root to 3 parts of chalk, and a little powdered Castile soap may be added.

Candies and sweets must only be allowed a child in moderation, as this is usually the principal cause of premature decay.

CHAPTER XX.

CARE OF THE EYES.

GENERALLY too little attention is paid to the care of a child's eyes, and many diseases of the eyes in later years may be traced to neglect at this stage.

Until the baby is three or four weeks old it should be kept in a darkened room and the eyes carefully bathed each day with 3-per-cent. solution of boric acid. Afterward on the first sign of inflammation about the eyes they should be bathed with this solution; but, if the inflammation continues or ulcers form on the lids, an oculist should be consulted.

When a child is old enough to attend school, and appears to be near-sighted or complains of headaches, an oculist should be consulted, and usually properly adjusted glasses will effect a cure.

Cross-eyed children should have the eyes straightened when four or five years of age.

CHAPTER XXI.

CARE OF HAIR.

THE child's hair and scalp should receive attention from birth. With the first bath the head should be thoroughly rubbed with sweet oil or vaseline, then carefully washed with a soft cloth and warm water and Castile soap, about 95° F. It should then be patted dry with a soft, warm cloth, and a little white vaseline smeared over the head. During the first few weeks the head should be rubbed daily with a little white vaseline, and washed every third day. Continue washing the head every third day and oiling every day, until six months old, after which time about once in two weeks is sufficient. Always use a soft brush for the child's hair, and do not use a comb until about a year and a half old. A child should not be allowed to go out-of-doors directly after the hair has been washed. Hot air is the best means by which to dry the hair.

A boy's hair should never be cropped close to the head, but kept cut short.

A girl's hair should be kept cut rather short until about nine years of age, and then allowed to grow. If this method is followed the hair in later life will be thicker and healthier.

CHAPTER XXII.

TRAINING TO PROPER CONTROL OF RECTUM AND BLADDER.

WHEN very young a child can be trained to use the chamber at regular intervals, and this training should commence when about three months old, and by the end of the first year a child should be able to indicate its desire. Place the child on the chamber regularly, four times a day, morning, noon, early evening, and at bed-time.

When a month old the bowels should move one to three times every twenty-four hours, the fæces appearing yellow and soft and containing no lumps. From three years of age the bowels should move once a day surely. If they do not, means should be taken to correct this fault.

CHAPTER XXIII.

CARE OF THE GENITALS.

PERFECT cleanliness in both sexes is the essential thing. No secretions of any kind should be allowed to accumulate. The parts should be carefully washed at the daily bath, dried with a soft, warm cloth, and dusted with talcum- or rice- powder to prevent chafing.

To anything abnormal the doctor's attention should be called at once.

CHAPTER XXIV.

EXERCISE AND AIRING.

EXERCISE is as important in infancy as in childhood, and this consists in the healthy cry which follows the cool sponge of the bath, kicking its legs, etc. Its clothing should be such as will not interfere with the free use of its legs and arms.

When three weeks of age a child may be taken from its crib and carried about the room for ten or fifteen minutes on a pillow. This should be done at least two or three times a day. At the age of five weeks the pillow may be discarded and longer walks taken, holding the child in a reclining position. When four months old it may be allowed to maintain a sitting posture, provided the head and back are supported. At nine months the child should be sufficiently strong to sit up without support. The child should be allowed to creep or stand and not be restricted. Place a comforter on

the floor in a warm room and allow the baby to roll around on same and exercise of his own free will.

When it begins to creep or stand it generally gets sufficient exercise of its own accord.

From now until four years of age allow a child to take all the exercise he wishes.

During the summer a young infant may be taken out-of-doors on pleasant afternoons as early as the second week, but be so covered that the direct sunlight will not reach its face or eyes.

In the late fall and winter a child should not be taken out-of-doors until it is at least six weeks old, and then only when the temperature is not below 65° F. The duration of the outings should not be more than fifteen minutes at first, but gradually lengthen to one or two hours.

A child should be accustomed to a change of temperature, and a good way to accomplish this is to open the windows and doors wide each day before it is taken out-of-doors, the child being already dressed for the outing, and

the change accomplished gradually in this way. When five or six months old it should be taken out-of-doors on pleasant days when the temperature is not below 25° F.

In older children about every form of exercise should be encouraged, such as tennis, ball, golf, running games, horseback-riding, bicycling, swimming, skating, etc.

Hard games—such as football—should not be undertaken until a boy is at least fifteen years of age, as he is undeveloped, and injuries received at this time are apt to be more lasting in their effects.

Up to the eleventh year of age no difference need be made in the exercise of the two sexes, and companionship should be encouraged. After this age the girl is nearing maturity, and the exercise should be restricted somewhat and not allowed to become too violent.

CHAPTER XXV.

WEANING.

WEANING should not be commenced until the child is at least seven months old, while nine months is the better age. Some physicians advise postponing weaning until the fifteenth month, or until the teeth are sufficiently formed so that the child can masticate food properly, which can then be given as a substitute for the mother's milk.

Postpone the weaning until the fall or winter if possible, and it should be done gradually. At six or seven months some artificial food may be given once a day, so as to relieve the strain on the mother and also prepare the child for weaning. One should commence by feeding with a spoon a little oftener during the day and nursing less, and by discontinuing the practice of nursing at night.

CHAPTER XXVI.

NURSERY.

THIS should be the sunniest and best-lighted room in the house, of southern exposure if possible, and fresh air is essential. It should not be on the ground floor if avoidable. The size of the room should be at least 1000 cubic feet to each person occupying same, and, for lighting, electricity is preferable. The air should be kept constantly pure by well-regulated ventilators, but draughts should be avoided, and heat by means of an open fire-place. If the latter is not obtainable, the best substitute is radiators.

Keep the temperature during the day between 68° and 70° F., and at night about 65° F.

The nursery should be well aired whenever the child is absent from the room, by opening the windows and allowing the air to circulate freely. It is also a good plan to air the nursery just before the child is put to bed at night, and in warm weather the windows may be left open

all night; but have the beds so arranged that they will not be in a draught.

The floor should be of polished hard wood, and rugs are preferable to carpets. The walls should be painted, not papered.

The nursery furniture ought to be plain and simple, with no upholstering. Have the bed of iron, with hair mattress, and air the bed every day before being made up. Each child must have a separate bed. The pillows should be small and also made of hair. For bed-coverings, wool blankets are preferable to comforters.

No plumbing to be allowed in the room.

CHAPTER XXVII.

WHEN TO CALL THE DOCTOR FOR THE BABY.

BLEEDING from the cord.
Retention of urine or fæces.
Swelling of child's breasts.
Signs of ulceration of the mouth.
Tongue-tie.
Appearance of undigested food in the discharges.
Convulsions.
Constant fretting.
Sore eyes.
Constant vomiting.
Emaciation.
Prostration.
Skin eruptions.
Diarrhœa.
Mouth-breathing.
Bronchitis.
Croup.
Fever.

Cleft palate.

Profuse sweating.

Worms.

Tongue-swallowing.

Ulcers.

Boils.

Abscess.

Paralysis.

Bed-wetting.

Swelling of any part of the body.

Earache.

Nightmare.

Urine with blood or pus in it.

Retarded walking.

Joint disease.

Bow-legs.

Nervous symptoms.

HINTS.

IN lifting young children one should be very careful to never take hold of them by the arms, but always place the hands on each side of the chest immediately below the armpits.

The infant should never be fed when lying, but its head should be raised.

Do not give the infant any medicine, no matter how simple, without the physician's advice.

Have the child vaccinated when 6 or 8 months old.

When a year old the child is usually able to utter distinct and intelligible sounds of one or two syllables.

Children born of women between the ages of 25 and 35 years are generally healthier,
(56)

longer lived, and more intelligent than those born of either younger or older women.

Bed-wetting. — This is usually caused by worms, bladder disease, adherent prepuce, or errors in diet. To prevent, a child should not be allowed to drink just before going to bed, and should be placed on the chamber the last thing before being put into bed. If the trouble continues, a physician should be called.

Harelip. — This is a very common deformity, and can only be corrected by an operation, and, the earlier this operation is performed after the child is 3 months old, the better.

Tongue-tie. — The symptoms of this deformity can be detected by the child's inability to nurse or protrude its tongue, and the physician's attention should be called at once.

Tongue-swallowing. — This may occur in whooping-cough or other diseases, and one's attention is attracted by the child's inability to

breathe. The tongue should be drawn forward by the fingers or forceps at once.

Cleft Palate.—This may occur with harelip, and should be operated upon at the age of three or four years.

Bow-legs.—This is frequently caused by allowing the child to walk while too young, or may result from some bone disease or lack of nutrition. The doctor should be consulted early, so that proper treatment can be applied, as, the older the child, the harder it is to correct the trouble.

Thirst. — Water is desired a great many times when a child frets, and it should be given freely between meals. The water should first be boiled and then cooled. Distilled water is preferable. In the summer children require more water than in winter, the same as adults.

Every family should own a clinical thermometer.

Always endeavor to train a child by firmness and kindness, and never punish him by shutting him in a dark closet, or frightening him in any way. One must remember that childhood is the most important period of life, and impressions formed at this stage last through and sometimes affect the whole life, and therefore the training cannot be too carefully regulated.

Nurse.—The nurse for children should not be more than 35 years of age, and ought to be healthy and free from any disease, such as tuberculosis, catarrhal affections of nose and throat, etc. Also a neat, intelligent person and possessing a good disposition.

Vomiting.—This may arise from a great many causes, overfeeding being the principal one. Diarrhœa and constipation are also caused by errors in diet.

Cholera Infantum.—This is a complaint of infancy, and every mother should be on guard

for its symptoms. It comes on suddenly, with copious watery discharges, loss of appetite, intense thirst, and restlessness. This is one of the gravest ailments of infancy, and a doctor should be summoned at once.

A woman may have something to eat in three or four hours after delivery, and the diet should consist of tea, toast, chicken-broth, milk, egg, or fish in small amounts.

After confinement a woman should remain in bed and keep perfectly quiet for eight to ten days, after which time has elapsed she may sit up in a chair for a short time, increasing each day. Walking should be postponed until the third week after confinement, and out-door exercise, such as walking or driving, should not be undertaken until the fourth week.

WEIGHTS.

The following is a table showing what the average weight should be of a boy or girl from birth to puberty:—

AGE.	BOY.	GIRL.
At birth	7 $\frac{3}{4}$ pounds.	7 $\frac{1}{2}$ pounds
6 months	15 $\frac{3}{4}$ “	15 “
1 year	20 “	19 “
1 $\frac{1}{2}$ years	22 $\frac{1}{2}$ “	22 “
2 “	26 “	25 “
3 “	31 “	30 “
4 “	35 “	34 “
5 “	41 “	39 “
6 “	45 “	43 “
7 “	49 “	48 “
8 “	54 “	52 “
9 “	60 “	57 “
10 “	66 “	64 “
11 “	72 “	70 “
12 “	79 “	81 “
13 “	88 “	91 “
14 “	99 “	100 “
15 “	110 “	108 “

ARTICLES TO CHOOSE A DIET FROM.

MILK.

Natural.	Fermented (koumiss).
Skimmed.	Peptonized.
Boiled.	Diluted (lime-water).
Egged.	Frozen (ice-cream).
Malted.	Iced.
Brandied.	Salted.
Biscuit powder.	Gum arabic.
Buttermilk.	Condensed.
Sterilized.	Lactated food.

WHEYS.

Wine.	Rennet.	Pepsin.	Alum.	Lemon.
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BROTHS.

Oyster.	Mutton.	Chicken.
Squab.	Robin.	Veal.

BEEF.

Natural juice.	Peptonized.	Pulp.
	Tea (celery, parsley, tomato).	
Powdered.	Liquid beef-extracts.	Blood.

GRUELS.

Flour.	Oatmeal.	Barley.
Peptonized.	Oat-flour.	Cornmeal.
Corn-starch.	Arrowroot.	Lentil.

WATERS, ETC.

Soda.	Lemonade.	Orangeade.
Tea.	Tamarind.	Barley.
Cocoa.	Raisin.	Crust-coffee.
Coffee.	Sea-moss.	Eggnogs.
Beer.	Prune.	Liquid malt.
Sherbet.	Apple.	Rice.
Toast.	Gum arabic.	Clam.
Ginger-ale.	Chamomile.	Acid phosphate.
Peppermint.	Spearmint.	Mineral acids.

FRUIT-JUICES.

Grape.	Orange.	Lemon.
Melon.	Wine.	Cider.
Raspberry.	Blackberry.	Shaddock.

JELLIES.

Fruit.	Calf's foot.	Tapioca.	Gelatin.
Bread.	Beef-tea.	Egg.	Wine.

CUSTARD.

Ordinary or without yolks.

TOAST.

Dry.	Water.	Milk.	Cream.	Cracker.
	Oswego biscuit.	Zwieback.		Hard-tack.

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